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SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/722,000	11/25/2003 RULE	424	1648	NIHB-2264
APPLICANTS Peter L. Collins, Rockville, MD; Brian R. Murphy, Bethesda, MD; Stephen S. Whitehead, Gaithersburg, MD;				
** CONTINUING DATA ***** This application is a CON of 09/291,894 04/13/1999 PAT 6,689,367 which is a CIP of 08/892,403 07/15/1997 PAT 5,993,824 which claims benefit of 60/047,634 05/23/1997 and claims benefit of 60/046,141 05/09/1997 and claims benefit of 60/021,773 07/15/1996				
** FOREIGN APPLICATIONS *****				
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/25/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/ZACHARIAH LUCAS/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY MD	SHEETS DRAWINGS 24	TOTAL CLAIMS 65
INDEPENDENT CLAIMS 3				
ADDRESS WOODCOCK WASHBURN LLP CIRA CENTRE, 12TH FLOOR 2929 ARCH STREET PHILADELPHIA, PA 19104-2891 UNITED STATES				
TITLE ATTENUATED CHIMERIC RESPIRATORY SYNCYTIAL VIRUS				
FILING FEE RECEIVED 1580	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	